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**UNITED STATES DISTRICT COURT
 CENTRAL DISTRICT OF CALIFORNIA**

JAMES R. GLIDEWELL DENTAL
 CERAMICS, INC. dba GLIDEWELL
 LABORATORIES,

PLAINTIFF(S)

v.

KEATING DENTAL ARTS, INC.

DEFENDANT(S).

CASE NUMBER

SACV11-01309-DOC (ANx)

**NOTICE OF CHANGE OF
 ATTORNEY INFORMATION**

The following information must be provided:

I, Darrell L. Olson, 77,633, Darrell.Olson@kmob.com

Name

CA Bar ID Number

E-mail Address

☒ am counsel of record or ☐ out-of-state attorney in the above-entitled cause of action for the following party(s)

Defendant and Counterclaimant Keating Dental Arts, Inc.

and am requesting the following change(s):

THIS SECTION MUST BE COMPLETED IF YOUR E-MAIL ADDRESS IS TO BE ADDED.

I ☐ consent ☐ do not consent to receive service of documents by electronic means in
 accordance with Fed. R. Civ. P. 5(b)(2)(E) and 77 (d), and Fed. R. Crim. P. 49(b)-(d).

SELECT THE CATEGORY AND COMPLETE THE INFORMATION REQUESTED:

☐ TO UPDATE NAME OR FIRM INFORMATION:

☐ I am providing the following new information pursuant to Local Rule 83-2.7 to be updated on the above-entitled cause of action.

PROVIDE ONLY THE INFORMATION THAT HAS CHANGED

Attorney Name changed to _____

New Firm/Government Agency Name _____

New Address _____

New Telephone Number _____ New Facsimile Number _____

New E-mail address _____

☐ TO BE ADDED AS COUNSEL OF RECORD: CHECK ONE BOX

☐ I am counsel of record in the above-entitled action and should have been added to the docket in this case. I made my first appearance in this case on _____

☐ This constitutes my Notice of Appearance to appear as counsel of record for the party(s) listed above in the above-entitled action.

IF YOUR FIRM IS **NOT** ALREADY PART OF THIS ACTION AND ARE ASSOCIATING IN AS COUNSEL OF RECORD A NOTICE OF ASSOCIATION SHOULD BE FILED. IF YOU ARE GOING TO APPEAR PRO HAC VICE, A SEPARATE APPLICATION OF NON-RESIDENT ATTORNEY TO APPEAR IN A SPECIFIC CASE, G-64 MUST BE FILED.

Attorney Name _____ CA State Bar Number _____
 Firm/Government Agency Name _____
 Address: _____
 Telephone Number _____ Facsimile Number _____
 New E-mail address _____

☒ TO BE REMOVED FROM THE CASE: **

☒ I am ☐ the aforementioned attorney from my firm is no longer counsel of record in the above-entitled cause of action.

CHECK ONE BOX

- ☐ The order relieving me/the aforementioned attorney from my firm was filed on: _____.
- ☐ There is/are other attorney(s) from the undersigned attorney's law firm/government agency who are counsel of record in this case.
- ☐ I am ☐ the aforementioned attorney is no longer with the firm/government agency representing the above-named party in this action. There is/are attorney(s) from my former firm/government agency who are currently counsel of record in this case.

**** This form cannot be used as a substitution of attorney form. For substitution of attorney procedures please refer to Local Rule 83-2.9 and form G-01, *Request for Substitution of Attorney* and G-01 ORDER, *Order on Request for Substitution of Attorney*. At least one member of the firm/government agency MUST continue to represent and receive service for the parties indicated above in this action.**

Date: 03/07/2013 _____

/s/ Darrell L. Olson _____

Signature of Attorney of Record / Attorney for the Firm

PLEASE NOTE: CM/ECF users must update their account information in the system pursuant to the General Order authorizing electronic filing, in addition to filing this Notice of Change of Attorney Information. A separate Notice must be filed in every pending case pursuant to Local Rule 83-2.7.